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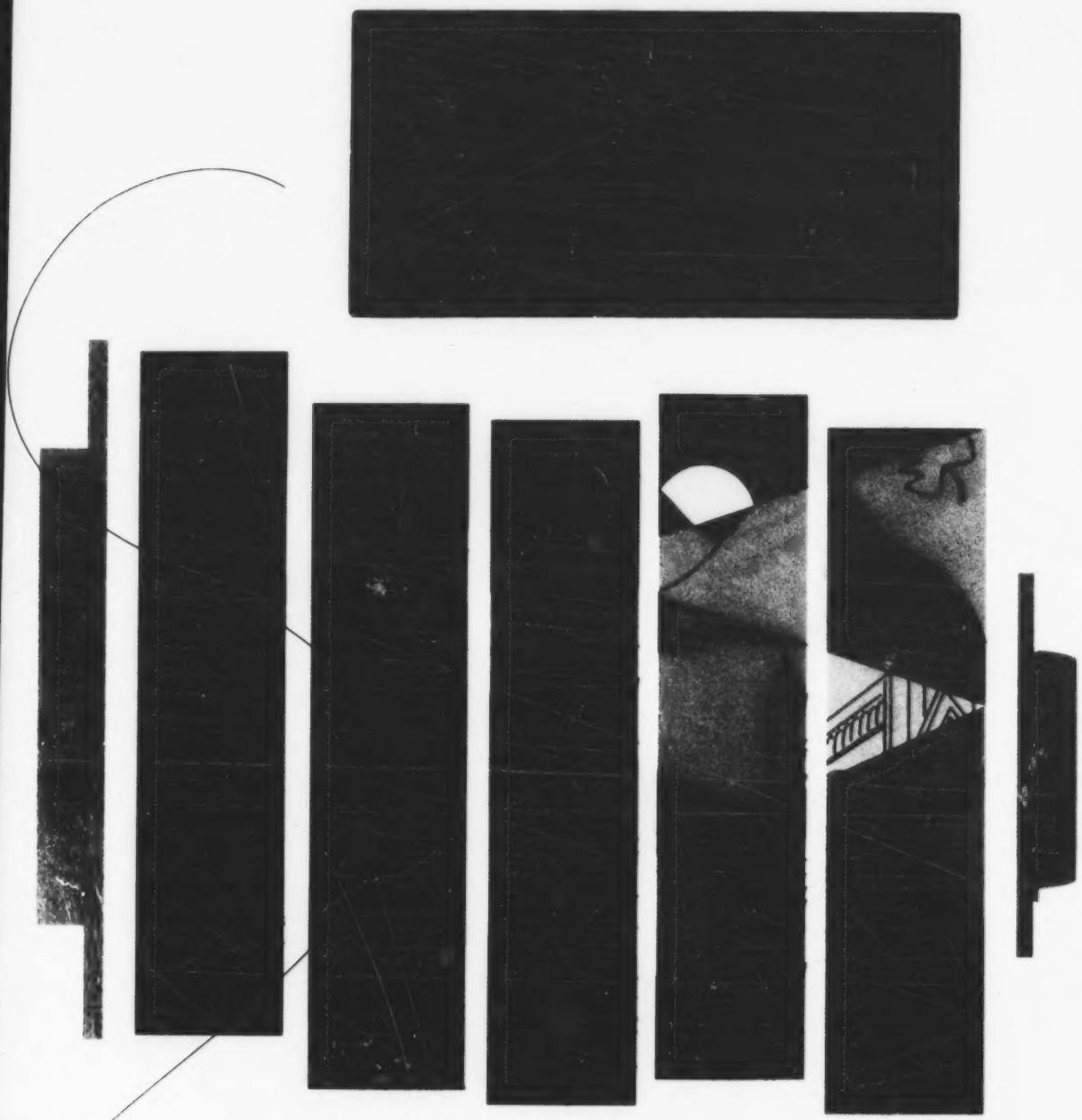

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Research Report

Review of Issues Associated with Serious Spouse Abuse Among Federally Sentenced Male Offenders

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Review of Issues Associated with Serious Spouse Abuse Among Federally Sentenced Male Offenders

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EXECUTIVE SUMMARY

Spouse abuse is an issue that has many negative effects on society. Recently several serious incidents involving federally sentenced offenders has drawn the attention of the Correctional Service of Canada to the issue of serious spouse assault among federally sentenced offenders. This report evaluated the severity of the problem of spouse abuse among federally sentenced offenders, examined the strategies utilized by the service in response to spouse abuse and suggested some areas which require future research.

According to a national Canadian survey, 15% of women currently with male partners reported violence by their current spouse while 48% of women with a previous marital partner reported violence by a previous spouse (Canadian Centre for Justice Statistics, 1994). Using police reports in Canada, Wilson and Daly (1994) found that between 1974 and 1992, women killed by their husbands constituted 38% of all adult female homicide victims while only 6% of adult male homicide victims were killed by their wives.

Between 22% and 27% of offenders have been found to be spouse abusers (Hart et al., 1994; Robinson and Taylor, 1995). However, this rate is based upon file reviews, and is most likely an underestimate.

Demographically, most research has found that abusers tend to be unemployed, under-educated, males with low occupational status who are in their early thirties or younger, although these findings are not always consistent. Psychologically, spousal assault offenders have been found to have low self-esteem and experience depression, have a personality disorder, especially anti-social or borderline, have a high need for control and dominance, and are impulsive. Perpetrators of spousal assault have been found to become angrier in conflict situations than non-violent men and to have poor verbal skills in asserting wants and needs in close relationships.

In terms of attitudinal variables, perpetrators of spouse abuse tend to externalize blame, engage in denial and minimization of the frequency and severity of assaults and have attitudes in favour of spouse specific violence. One consistent risk marker for spousal violence is witnessing or being a victim of physical abuse as a child. Empirical research has found a correlation between overall drinking behaviour or alcoholism and risk of spouse abuse offending although taking intoxicants prior to an abusive episode has not shown as clear a relationship.

Men who are more violent outside of the family tend to inflict more severe assaults on spouses. Men who commit severe assaults on their spouses are often abusive psychologically and sexually towards them. Particularly relevant is the finding that severe abusers tend to be involved in a criminal lifestyle and often have their attitudes towards spouse abuse reinforced by friends.

Spouse abusers and especially severe spouse abusers appear to have many characteristics in common with federally supervised offenders. For example, Crawford and Gartner (1992) found that 30% of offenders who had murdered their spouses had an arrest record for violent crime and 29% had an arrest record for non-violent crime.

Triggers or situational factors that appear to increase the likelihood of spouse abuse at a particular time include stress, emotional arousal, and specific incidents such as separation. These factors are likely to occur when offenders are released into the community since reintegration into the community is particularly stressful.

Due to the elevated level of risk of harm to spouses, the Service has responded with several practices aimed at detecting and reducing the prevalence of spouse abuse perpetration among federal offenders. Currently, staff use the Family Violence Risk Assessment process as part of the Intake Assessment to assess level of risk for perpetration of family violence. In addition, monitoring of offender

needs in the community using the Community Risk/Needs Management Scale may affect the level of supervision for offenders with domestic violence histories. These methods provide parole officers with the ability to arrange the necessary programming, and provide the appropriate level of supervision to offenders released into the community.

Future research should focus on refining the identification of spouse abusers, determining the level of spouse abuse among federally sentences offenders especially within the community, and improving community supervision techniques for offenders identified as potential spouse abusers. This research would improve the Service's ability to reduce spouse assault among federally sentenced offenders.

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INTRODUCTION

Violence against female partners and other family members by offenders under the supervision of the Correctional Service of Canada (CSC) is of concern to both the Correctional Service of Canada and the Canadian public. The purpose of this report is to present a review of available information on family violence by offenders to assist in the determination of the need for additional research and intervention.

The report was prepared as a response to three separate serious incidents. In two of the cases, the offenders were released into the community (one on full parole, the other on statutory release) while the other offender was serving a life sentence and the incident occurred during a private family visit. These offenders had lengthy criminal records including violent offences and had long current sentences. Interestingly, two of the three offenders' current sentences were for having murdered a woman. According to investigations of these incidents, the incidents were neither foreseeable nor preventable. There did not appear to be any unique attributes of the relationships or of the individuals involved in the relationships that would help identify similar high risk situations in the future.

As a response to these serious incidents, this report addresses several issues including:

- the rate of spouse abuse, and homicide of female spouses within the general population and spouse abuse within the offender population
- the variables identified as risk markers of spouse abuse offending
- the current practices of CSC in addressing the issue of spouse abuse (indicating needs and risk, programming, supervision and detection of offending in the community)
- future directions for research within CSC

PROBLEMS WITH SPOUSE ABUSE RESEARCH

Several methodological problems have been identified by researchers in the area of spousal violence research. Such problems include operationalization and measurement of "spouse abuse", inconsistent and inadequate follow-up time periods, and lack of control groups. In addition, spouse abuse (or spousal assault, domestic violence, family violence, wife abuse, wife assault, partner abuse, etc.) varies in its definition from study to study.

First, the type of relationship included in the research has been inconsistent. For example, the meaning behind spouse may include partners who are legally married, or those in co-habitating (common-law) relationships. In addition, homosexual relationships, female to male violence in relationships, and separated or divorced couples have been inconsistently included in the definition of spousal assault. Abuse has also been inconsistently defined in the literature. An example of this inconsistency is the presence or absence of threatening or sexual assault in the definition of spouse abuse.

The measurement of spouse abuse has also differed from study to study. Sources of information regarding the presence of spouse abuse have ranged from official reports, to correctional files, to self-report of the perpetrator, to self-report of the victim. The general belief among researchers in the field is that the use of several sources of information is the best option due to under-reporting (especially to police departments), denial by perpetrators and victims, and inconsistency of information from several sources. It is believed that several sources of information produce the most complete and accurate picture of spouse abuse.

When assessing the effect of treatment on violent couples, follow-up periods have often been inconsistent and inadequate. As indicated by Rosenbaum (1988), "the treatment literature suggests that couples often experience a 'honeymoon period' characterized by an absence of violence" (pp. 101) making short follow-up periods inadequate in detecting a resurfacing of spousal violence. Rosenbaum (1988) suggests that follow-up periods following treatment need to be at least six months in duration. Dunford's (1992) findings suggest that a six-month follow-up period is not sufficient time to assess recidivism of spouse assault, and that a twelve-month period may be more satisfactory.

The measurement of treatment gain has also been inconsistent among studies of spousal violence. For example, some studies have interpreted a reduction in violence as a treatment gain while others have required a complete cessation of violence as sufficient outcome for gain (Rosenbaum, 1988).

In spouse abuse literature, very often control groups are not provided. It is particularly useful to include a group of couples who have discordant relationships but are not regularly violent. Accordingly, research could distinguish between couples who have discordant relationships and those with discordant relationships who are also violent, thereby isolating the effect of the violence.

Another problem associated with the domestic violence research is the gross under-reporting of spousal violence by both perpetrators and victims, especially to police and criminal justice personnel. According to a Canadian national survey, only 26% of the marital violence reported by victims had been reported to police (Canadian Centre for Justice Statistics, 1994). An earlier estimate by Dutton (1987) puts the rate of reporting at 15%. If one were estimating prevalence of spouse abuse by complaints, arrests, or convictions, the rate of spouse abuse would be grossly underestimated. Dutton (1987) has suggested

that spousal assaults serious enough to potentially come to the attention of the criminal justice system go through a filtering process which includes victim reporting, police response, police arrest of the perpetrator, going to trial, and punishment through a fine or jail sentence for the assault. At the end of this process the probability of the offender being given a fine or jail sentence for the assault was estimated at less than 1% (Dutton, 1987).

Given the filtering process, the rate at which perpetrators of spousal assault are incarcerated in federal institutions for these assaults is likely very low. In addition, federal offenders who are incarcerated for offences related to spouse abuse would probably constitute only the most severe spousal assaulters who have assaulted most frequently and committed the most damaging assaults.

Reporting of the spousal assault incident to the police can be mitigated by denial and minimization on the part of both perpetrators and victims (Adams, 1990; Rosenbaum, 1988). Often, perpetrators will divert blame for spousal violence to the victim or to external sources such as alcohol or drugs (Adams, 1990). In comparing victim reports to perpetrator reports, the rate of spouse abuse is greatly increased but even this may be an underestimate. Victims will often cite reasons for under-reporting abuse such as thinking the abuse was too minor to report or wanting to keep the incident private (Canadian Centre for Justice Statistics, 1994). Victims may experience shame, embarrassment, or even guilt (internalizing the blame from the perpetrator). In addition, victims may fear reprisal from the perpetrators if the perpetrators were to find out that they had reported the violence (Adams, 1990). Other reasons for non-disclosure include fear of loss of a partner, and fear of loss of a father of the children, if incarceration results from reporting.

SPOUSE ABUSE PREVALENCE

Rate of Spouse Abuse Victimization across Canada

The Canadian Centre for Justice Statistics (1994) conducted a telephone survey of women assessing the prevalence of spousal assault across Canada. The definition of violence included violent acts similar to those contained in the Conflict Tactics Scale (CTS) (Strauss & Gelles, 1990) ranging from "threats of violence to threats or use of guns or other weapons" as well as sexual assault (Canadian Centre for Justice Statistics, 1994). According to the survey, 48% of women with a previous marital partner reported violence by a previous spouse while 15% of women currently with male partners reported violence by their current spouse assault (Canadian Centre for Justice Statistics, 1994).

Overall, in the entire sample of women surveyed, 15% had suffered severe abuse in any relationship: 5% had experienced severe abuse in the current relationship while 31% had experienced severe abuse in previous relationships. Of women who reported spousal abuse in current or previous relationships, 53% reported having endured serious abuse (Canadian Centre for Justice Statistics, 1994). Serious abuse included circumstances where women were injured by the assault (45%), and where the women had to take time off from their everyday activities (31%). Approximately one-third of women who were abused in the current relationship were severely abused while almost two-thirds (64%) of women abused in previous relationships were severely abused.

In terms of the frequency of abuse, almost two-thirds of women reporting abuse had been assaulted more than once and 32% indicated that they had been assaulted more than ten times in current or previous relationships (Canadian Centre for Justice Statistics, 1994). In general, women reported fewer incidents of violence in the current relationship that in previous relationships (Johnson,

1995). While current relationships were shown to have fewer instances of violence and were less likely to have serious violence than previous relationships, previous relationships may have terminated due to severe abuse whereas the current relationship may not have endured long enough for domestic violence to escalate in severity of frequency.

The killing of women by marital partners (uxoricide) has been reported to be 13 per million couples in the population (Wilson & Daly, 1994). In contrast, 4 husbands per million couples were killed by their spouses (Wilson & Daly, 1994). Using police reports in Canada, Wilson and Daly (1994) found that between 1974 and 1992, women killed by their husbands constituted 38% of all adult female homicide victims while only 6% of adult male homicide victims were killed by their wives (Wilson & Daly, 1994). Particularly disturbing is the finding that "the chance of being killed by one's husband was nine times greater than the chance of being killed by a stranger" (Wilson, Daly, and Wright, 1993, pp. 270).

Crawford and Gartner (1992) examined coroner and police reports and concluded that 0.1 women per 1 000 000 (1 in 10 000 000) women aged 15 and older in Ontario were killed by intimate partners annually. It is necessary to note the rate of intimate femicide differs between the two Canadian studies (Crawford & Gartner, 1992; Wilson & Daly, 1994) due to the different samples. For the Wilson and Daly (1994) sample, couples in Canada were considered while in the Crawford and Gartner (1992) sample, women aged 15 and older were considered regardless of their marital status.

In Ontario, intimate femicides accounted for 61% of all solved cases of murder of women, and therefore women were more likely to be killed by an intimate partner than anyone else (Crawford & Gartner, 1992). Here the difference between the two Canadian studies (Crawford & Gartner, 1992; Wilson & Daly, 1994) occurs

due to reliance on different information: police reports for Wilson and Daly (1994) versus police reports and coroner reports for Crawford and Gartner (1992).

The rate of intimate femicide did not decrease from 1974 to 1990 in Ontario despite increased awareness and improved victim services (Crawford & Gartner, 1992).

Rate of Spouse Abuse among Offenders

Recently, several studies have attempted to discern the prevalence of spousal assault among offenders (Hart, et al., 1994, Robinson & Taylor, 1995). Unfortunately these studies have used a file review methodology which relies on official and documented evidence of spousal assault and thereby may be underestimating the actual prevalence. Robinson and Taylor (1995) reviewed the institutional files of a regionally stratified random sample of 935 federal offenders in Canada. One quarter (24%) of the offender files in the sample had evidence of violence against a female partner, with 22% indicating physical abuse in particular (Robinson & Taylor, 1995). In this case violence included physical, sexual, and psychological abuse of a female partner, although almost all cases (93%) had physical abuse documented (Robinson & Taylor, 1995). The estimate of any abuse against female partners increased to 29% and physical abuse of female partners rose to 27% when only the files of offenders who were involved in a marital relationship at least once in their lives were included.

Hart and his colleagues (1994) used a file review to examine the rate at which evidence of wife assault in community-resident offenders existed. Overall, in a sample of 256 male adult offenders on bail, probation, or provincial parole in one region in Canada, 22% had current or past charges or convictions for wife assault or had a history of wife assault documented that did not result in charges

(Hart et al., 1994). Given that these offenders were not federally sentenced offenders and therefore had sentences of less than two years in length, they probably represent less serious and less "criminalized" offenders than those found in federal prisons.

Overall, the prevalence of current or past perpetration of documented physical abuse of spouses among offenders is approximately 27%. However, this prevalence rate is most likely an underestimate.

RISK MARKERS FOR SPOUSE ABUSE

Reviews of the literature concerning risk markers of spouse abuse have tended to identify several of the same risk markers. The term risk markers is being used instead of risk predictors since a causal relationship between these variables and domestic violence have not been confirmed through longitudinal study (Saunders, 1995). Risk markers can be classified into four categories: demographic, psychological, attitudinal, and behavioural. Figure 1 presents a basic model of historical, mediating, and situational characteristics that have been found to be factors related to spouse abuse incidents.

Demographically, research indicates that spouse abusers tend to be in their early thirties or younger, under-educated, unemployed or have low occupational status (Appleford, 1989; Canadian Centre for Justice Statistics, 1994; Howell & Pugliesi, 1988). However, these results have not been consistent (i.e., Lupri, Grandin, and Brinkerhoff, 1994). Co-habitating couples appear to be at greater risk for domestic violence than married couples (Canadian Centre for Justice Statistics, 1994; Stets & Straus, 1989). It is important to note, however, that these demographic findings may be somewhat biased due to the composition of the samples. For example, many of the studies examining correlates of spouse abuse include women who have sought assistance through organizations that work with abused women, such as women's shelters. Other women may have been excluded because they have access to other forms of assistance (e.g., hotels, homes of family or friends) which would not bring these women to the attention of researchers.

Psychologically, spousal assault offenders have been found to have low self-esteem, experience depression (Appleford, 1989; Saunders, 1995; Tolman & Bennett, 1990), have a personality disorder, especially anti-social or borderline

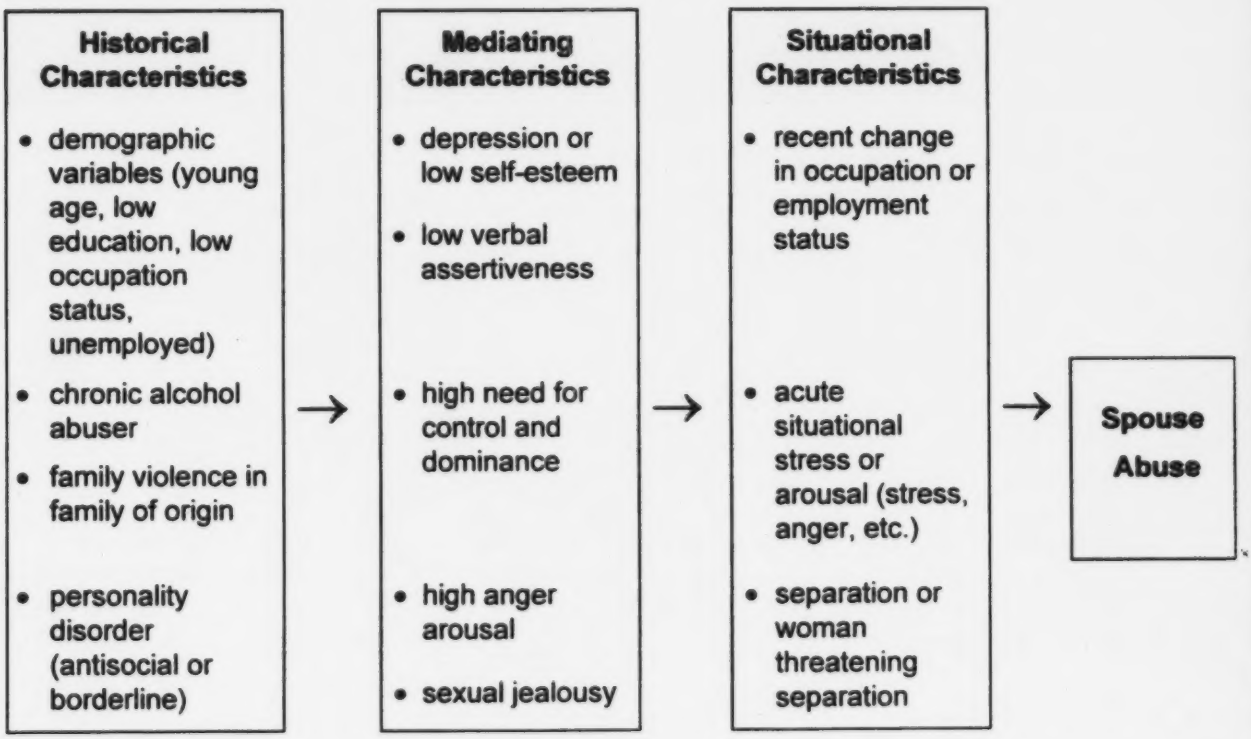
(Appleford, 1989; Davidovich, 1990; Dutton & Hart, 1992; Geffner & Rosenbaum, 1990; Kropp, Hart, Webster, and Eaves, 1995; Saunders, 1995; Tolman & Bennett, 1990), have a high need for control and dominance, (Appleford, 1989; Geffner & Rosenbaum, 1990; Goldsmith, 1990) and are impulsive (Appleford, 1989; Geffner & Rosenbaum, 1990). In terms of anger and assertiveness, perpetrators of spousal assault have been found to become angrier in conflict situations than nonviolent men but have poor verbal skills in asserting wants and needs in close relationships (Davidovich, 1990; Geffner & Rosenbaum, 1990; Tolman & Bennett, 1990). Perpetrators of spouse assault have been found to "view themselves as both low in masculinity and low in positive traits stereotypically associated with either gender" and therefore may attempt to compensate "through aggressive behavior toward their partners to bolster their masculine images" (Tolman & Bennett, 1990, pp. 96). One consistently found risk marker for spousal violence is witnessing or being a victim of physical abuse as a child for both the general population (Appleford, 1989; Cyr, 1994; Davidovich, 1990; Geffner & Rosenbaum, 1990; Kropp, et al., 1995; Myers, 1996; Rodgers, 1994; Saunders, 1995) and the federally incarcerated population (Dutton and Hart, 1992; Robinson & Taylor, 1995). Other characteristics of batterers include being fearful of abandonment, possessive and controlling behaviour, being fearful of intimacy, and cognitive rigidity (Appleford, 1989; Geffner & Rosenbaum, 1990).

Perpetrators of spouse abuse tend to externalize blame and minimize the frequency and severity of assaults (Appleford, 1989; Carden, 1994). In addition, perpetrators of domestic violence hold rigid definitions of masculinity/ femininity and male/ female roles, although this finding appears to be limited to certain types of aggressors (Appleford, 1989; Saunders, 1995). Although negative attitudes toward women do not appear to differentiate spouse abusers from men who do not abuse their spouse (Dutton, 1995a), attitudes in favour of spouse

specific violence has consistently shown an association to spouse abuse (Carden, 1994).

Abuse of alcohol by the male perpetrator appears to play a role since "women were at six times the risk of violence by partners who frequently consumed five or more drinks at one time compared to women whose partners never drank" (Canadian Centre for Justice Statistics, 1994, pp. 9-10). Other studies (Canadian Centre for Justice Statistics, 1994; Saunders, 1995; Tolman & Bennett, 1990) have also found a correlation between overall drinking behaviour or alcoholism and risk of spouse abuse offending. However, taking intoxicants prior to an abusive episode has not shown as clear a relationship (Saunders, 1995).

Figure 1: Model of Spouse Abuse


Historical Characteristics
• demographic variables (young age, low education, low occupation status, unemployed)
• chronic alcohol abuser
• family violence in family of origin
• personality disorder (antisocial or borderline)
Mediating Characteristics
• depression or low self-esteem
• low verbal assertiveness
• high need for control and dominance
• high anger arousal
• sexual jealousy
Situational Characteristics
• recent change in occupation or employment status
• acute situational stress or arousal (stress, anger, etc.)
• separation or woman threatening separation
Spouse Abuse

Risk Markers for Severe Spouse Abuse

Several of the risk markers for spouse abuse have also been found to be risk markers for severe spouse abuse. For example, men with histories of family violence in their family of origin tend to inflict more severe assaults (Myers, 1996; Saunders, 1995). In addition, "severely abusive men showed higher levels of juvenile delinquency, anti-social personality disorder, substance abuse, depression, marital maladjustment, jealousy and attitudes tolerant of violence towards female partners, as well as lower levels of self-esteem and self-control" (Myers, 1996, pp. 18).

Men who are violent outside of the family tend to inflict more severe assaults on spouses (Gondolf, 1988; Hamberger et al., 1996; Saunders, 1995; Tolman & Bennett, 1990). Comorbidity of psychological abuse of spouses, sexual assault of spouses, and threatening behaviour has been found to occur more often among perpetrators of severe spouse abuse (Appleford, 1989; Canadian Centre for Justice Statistics, 1994). In addition, several studies have found a relationship between alcohol or drug use at the time of the assault and severe spouse abuse, although this finding has not been consistent (Saunders, 1995). Particularly relevant is the finding that severe abusers tend to be involved in a criminal lifestyle (Saunders, 1995). Severely violent abusers also often have their attitudes towards spouse abuse reinforced by friends (Saunders, 1995). Particularly disturbing is the finding that severe physical abuse often occurs while the woman is pregnant (Saunders, 1995).

Risk Markers for Homicide of Female Spouses

Demographically, men who murder their female spouses tend to be similar to perpetrators of spousal assault (Goetting, 1989; Crawford & Gartner, 1992). For example, Goetting (1989) found that in her sample of men who had killed their spouses, most men had a relatively low level of education and were unemployed. Although these men tended to be older (mean age of 37.2 years), this may be explained by the time required for violence to escalate to the point of homicide (Goetting, 1989).

Prior physical abuse of female intimates is one of the most widely cited risk markers for homicide of female spouses (Campbell, 1995; Crawford & Gartner, 1992; Danys Consulting Inc., 1992; Goetting, 1989; Wilson & Daly, 1993). Research has supported the view that violence within spousal relationships often escalates in severity (Canadian Centre for Justice Statistics, 1994; Feld & Strauss, 1989). Threats of death made by the male partner appear to occur often in cases where men kill their spouses (Crawford & Gartner, 1992).

As mentioned earlier, generally violent spouse assaulters inflict more severe assaults with higher frequency and therefore it is not surprising that these same men are likely to commit uxoricide. In Crawford and Gartner's (1992) study, 30% of offenders had an arrest record for violent crime. Similarly, 29% of offenders had an arrest record for non-violent crime (Crawford & Gartner, 1992). Based on some descriptive information, risk to intimate partners may be increased when the male perpetrator has a history of violence against women, either the current spouse or other women (Crawford & Gartner, 1992)

In terms of motivation for the homicide, several studies have found that separation increases the risk to female partners of being killed by their male partners (Block & Christakos, 1995, Campbell, 1995; Canadian Centre for

Justice Statistics, 1994, Crawford & Gartner, 1992; Wilson & Daly, 1993; Wilson, Daly, and Wright 1993). Crawford and Gartner (1992) estimate that women who are separated from their spouses were approximately five times more likely to be killed by their partner than women with other marital statuses. Similarly, threatening separation by the female partner has been found to increase the risk of homicide (Adams, 1990; Block & Christakos, 1995; Wilson & Daly, 1993). Male jealousy has been revealed as a common reason for the murder of female intimates (Adams, 1990; Campbell, 1992).

Use of alcohol or drugs at the time of the homicide does not appear to play a role since the consumption of alcohol by offenders was no more common in intimate femicides than other killings in Crawford and Gartner's (1992) study. Female partners are at an increased risk of homicide when the male partner has suicidal tendencies (Block & Christakos, 1995). In lending support to this finding, two studies (Crawford & Gartner, 1992; Danys Consulting Inc., 1992) found that offenders who killed their female spouses had much higher rates of suicide following the homicide than other homicide offenders.

Lists of warning signs of possible impending perpetration of homicide of female partners have been compiled. Although not an exhaustive list, the following is a list summarizing Campbell's (1995) review:

- access to/ ownership of guns
- use of weapon in prior abusive incidents
- threats with weapon(s)
- threats to kill
- serious injury in prior abusive incidents
- threats of suicide
- drug or alcohol use
- forced sex of female partner

- obsessiveness/ extreme jealousy/ extreme dominance

Using some of these danger signs, Campbell (1995) designed a "Danger Assessment" to assess the potential risk of intimate femicide. Campbell (1995) mentions that this instrument may be useful for probation officers or other officers of the court to utilize in making decisions about supervision of offenders with spouse abuse histories.

Characteristics of Spouse Abuse Incidents

Situational factors associated with spouse abuse that have been discussed by researchers include level of intoxication, anger and emotional arousal, and stress. In regards to alcohol intoxication, research has stressed that although regular alcohol abuse has been found to be a correlate to spouse abuse, no direct relationship has been found between alcohol use at the time of the spousal assault and the likelihood of spousal violence (Tolman & Bennett, 1990). Alcohol is considered neither necessary nor sufficient for the occurrence of spouse abuse (Geffner & Rosenbaum, 1990). However, there do appear to be factors which may mediate the relationship between alcohol intoxication and spouse abuse including violence in the family of origin, personality problems, dysfunctional interaction in relationships, inability to regulate emotions, socioeconomic status, and circumstantial endorsement of violence (Tolman & Bennett, 1990). Several researchers have suggested that alcohol intoxication may in fact be an excuse for abusive behaviour by perpetrators rather than triggers to such violent behaviour (Geffner & Rosenbaum, 1990; Vasell-Augenstein & Ehrlich, 1992).

Researchers have examined the psychological state of the perpetrator during and prior to the abusive incident. The earlier review of risk markers for spouse abuse stated that abusive men tend to become angrier during conflicts than non-

violent men do. It appears that perpetrators of spousal violence often react to anger or emotional arousal in more extreme ways (Tolman & Bennett, 1990).

Stress also appears to have a mediating effect on the likelihood of spouse abuse (Tolman & Bennett, 1990). Tolman and Bennett (1990) suggest that the dynamic role of acute situational stress rather than the study of external or general life stressors appear to be more relevant to the explanation of domestic violence. For example, recent changes in employment status, occupation level, or socioeconomic status appears to play more of a role in explaining the likelihood of spousal assault than the current status of the perpetrator (MacEwan & Barling, 1988; Tolman & Bennett, 1990).

OFFENDER TYPOLOGIES AND CHARACTERISTICS

Several researchers have attempted to generate typologies of male perpetrators of spouse abuse (Gondolf, 1988; Saunders, 1992; Hamberger et al., 1996). Although different sample types were used in the three studies, similarities emerged in the number of typologies and the characteristics of men belonging to each typology. Defining typologies of male batterers serve several purposes including identifying the amount of danger the batterer poses to the victim, and identifying the treatment needs of the perpetrators (Hamberger et al., 1996).

Gondolf (1988) used a cluster analysis to investigate typologies of perpetrators of spouse assault based upon the reports of battered women admitted to shelters in one state. His analysis identified three clusters of men: the sociopathic batterer, the antisocial batterer, and the typical batterer (Gondolf, 1988).

In terms of severity of abuse, the sociopathic batterer inflicts the most severe abuse, and is most likely to use a weapon while the typical batterer inflicts the least severe abuse and is least likely to use a weapon (Gondolf, 1988). Not only does the sociopathic batterer appear to be the most dangerous towards his wife but also towards other family members, and towards individuals outside the family (Gondolf, 1988). The sociopathic batterer is most likely to come to the attention of the criminal justice system due to his high likelihood of being previously arrested for property, violent and drug- or alcohol-related crime (Gondolf, 1988).

Overall, the antisocial batterer appears to be a similar to the sociopathic batterer: he is extremely abusive, is generally violent, but is less likely to have been arrested than the sociopathic batterer. On the other hand, the typical batterer tends to commit less severe abuse and is only violent towards his spouse.

Similarly, Saunders (1992) performed a cluster analysis on the data obtained from reports of perpetrators in treatment, some of which were court referred. Saunders (1992) also found that three typologies had emerged: family only aggressors, generally violent aggressors, and emotionally volatile aggressors. Family only aggressors were similar to the typical batterers found by Gondolf (1988). Additional findings for this group included reported low levels of anger, depression and jealousy, although low scores on a measure of social desirability suggested a suppression of feelings (Saunders, 1992). The family only aggressors were least likely to have been severely abused as children and were least likely to be violent outside of the family (Saunders, 1992). Their involvement in the criminal justice system was limited to the possibility of being arrested for driving while intoxicated (Saunders, 1992). Family only aggressors reported the most satisfaction in the relationship, the least marital conflict, and being the least psychologically abusive (Saunders, 1992).

Saunders' (1992) generally violent aggressor is most comparable to Gondolf's (1988) sociopathic batterer. The generally violent aggressors were most likely to be violent outside the home and reported the most frequent use of severe violence (Saunders, 1992). Interestingly, generally violent aggressors reported relatively low or moderate levels of depression suggesting that these batterers may be suffering psychic numbing as a result of Post Traumatic Stress Disorder brought on by severe abuse in childhood (Saunders, 1992). Generally violent aggressors often had violence associated with alcohol use, had rigid (traditional) attitudes about sex roles, and had current problems with impulse control (Saunders, 1992). The generally violent aggressors had relatively high rates of arrest for drunk driving and violence (Saunders, 1992).

Finally, the emotionally volatile aggressors reported the highest levels of anger, depression and jealousy (Saunders, 1992). Emotionally volatile aggressors were

only violent with their spouses, reported very rigid sex-role attitudes, were most afraid of losing their partners, and expressed suicidal ideation (Saunders, 1992). The high degree of sexual jealousy, fear of separation, and suicidal ideation may potentially place the emotionally volatile aggressors at higher risk to commit femicide against their spouses (Block & Christakos, 1995; Campbell, 1992; Danys Consulting Inc., 1992).

Recently, Hamberger and his colleagues (1996) used a cluster analysis on a large sample of batterers referred for court-mandated treatment. Although Hamberger and others (1996) found six clusters during analysis three were very small, containing only a few subjects, and therefore only the three larger clusters were further analyzed. Consistent with the findings of Gondolf (1988) and Saunders (1992), Hamberger et al. (1996) found a cluster of "nonpathological" batterers. These batterers had no elevations above baseline on the MCMI (Millon Clinical Multiaxial Inventory; Millon, 1983) scales; showed the lowest depression, anger proneness, violence severity and self-reported violence frequency; were least likely to report alcohol problems; reported less child abuse victimization; mostly limited their violence to intimate partners; and had the least extensive police records (Hamberger et al., 1996).

Hamberger and his colleagues (1996) found a cluster that was similar to Gondolf's (1988) sociopathic batterer and Saunders' (1992) generally violent aggressors. These aggressors showed MCMI elevations on the Antisocial, Narcissistic and Histrionic subscales as well as mild elevations on the Paranoid subscales and a significant elevation on the Drug Abuse subscale (Hamberger et al., 1996). This group reported themselves to be more anger prone, described more extrafamilial violence, and had more extensive police contact for both violent and nonviolent offences (Hamberger et al., 1996). In addition, these men

reported more severe and more frequent spousal violence perpetration (Hamberger et al., 1996).

The third group that emerged was most consistent with Saunders' (1992) emotionally volatile group. This typology is characterized by a high level of depression, and elevations on several of the MCMI subscales including Borderline-Cycloid, Anxiety, and Alcohol and Drug Abuse (Hamberger et al., 1996). These men also reported more child abuse victimization than the other clusters, and reported more extensive histories of prior alcohol and drug abuse counseling than the "nonpathological" group (Hamberger et al., 1996). In comparison to the other typologies, these aggressors showed moderate levels of generality of violence, violence severity, and rates of police contact for both violent and nonviolent offences (Hamberger et al., 1996).

Clearly one of the most important differentiations that needs to be made within the population of male perpetrators of spouse abuse is between the solely domestically violent versus the generally violent wife abusers (Appleford, 1989; Davidovich, 1990; Tolman and Bennett, 1990). In general, men who use violence both inside and outside the home have been found to commit more severe assaults (Gondolf, 1988; Hamberger et al., 1996; Saunders, 1992; Tolman & Bennett, 1990). These generally violent men tend to have lengthy criminal records, may have greater alcohol and drug use, and may be less stable and less committed to their relationships (Gondolf, 1988; Hamberger et al., 1996; Saunders, 1992; Tolman & Bennett, 1990). Violence has been adopted by the generally violent man as a lifestyle (Appleford, 1989).

SPOUSE ABUSE AMONG FEDERALLY SENTENCED MALE OFFENDERS

An estimate of the rate of perpetration of spouse abuse among offenders based upon file review methodology was approximately 27% (Robinson & Taylor, 1995). However, several of the risk markers for spouse abuse perpetration coincide with characteristics of many federally sentenced male offenders. Demographically, many offenders have low educational, occupational and income levels similar to many of the spouse abusers. For instance, based upon data collected on the inmate population in 1996, approximately 70% of offenders tested below the grade 8 level, and 71% had unstable job histories. Similarly, many offenders (61%) in the federal institutions have histories of alcohol abuse, which has been consistently found to be a risk marker for spouse abuse. Historically, the most severely violent spouse abusers tend to have family violence in their family of origin, which is a very common characteristic of federally sentenced male offenders. According to Robinson and Taylor's (1995) study, approximately half of the offenders had documented evidence of childhood abuse in the form of physical, sexual, or psychological abuse, neglect, or had witnessed the abuse of other family members.

In terms of psychological risk markers, anti-social personality disorder and borderline personality disorder is common to a large proportion of both spousal abusers and federally sentenced male offenders (Blackburn, 1993; Dutton & Hart, 1992; Saunders, 1995; Tolman & Bennett, 1990). In addition, impulsivity, has been show to increase the risk of criminality and has been found to be a risk marker for spouse abuse perpetration (Appleford, 1989; Blackburn, 1993; Geffner & Rosenbaum, 1990).

The typologies identified by the research have also revealed some similarities and overlaps between spouse abusers and federal offenders. Several

researchers have found that more severe spousal assaults tend to be committed by men who have historically been violent both within and outside the family (Gondolf, 1988; Hamberger et al., 1996; Saunders, 1992). In fact, spouse abusers with a record of arrests for violence tend to commit the most severe assaults upon their spouses (Gondolf, 1988). Therefore, given that approximately 80% of federally sentenced offenders have committed a violent offence (including murder, attempted murder, manslaughter, assault, sexual offences, robbery) (Correctional Service of Canada, 1997), one could expect a high rate of severe spouse abuse perpetration within this population.

Common to the three typology studies reviewed (Gondolf, 1988; Saunders, 1992; and Hamberger et al., 1996) was one typology most relevant to corrections. Gondolf's (1988) sociopathic batterer was described as being "extremely abusive of his wife and children" (pp. 196). This type of offender is very likely to use a weapon, to have been sexually abusive, and to have a wide range of arrests including property, violent, and drug- or alcohol-related crime (Gondolf, 1988). Similarly, Saunders' (1992) generally violent men were most likely to be violent outside the home. Violent episodes were usually associated with alcohol use for these men, and they reported the most frequent use of severe violence. In addition, they had relatively high rates of arrest for driving while intoxicated and violence (Saunders, 1992). Interestingly, the majority of these men had been severely abused as children. Hamberger and his colleagues (1996) also found a group of men who described high levels of extrafamilial violence, had more extensive police contacts for both violent and non-violent offences and reported more severe and more frequent violence than other groups. These men also scored highly on Antisocial, Narcissistic and Histrionic subscales of the MCMI (Hamberger et al., 1996).

Due to the similarities between spouse abuse perpetrators and the federal population, risk of spouse abuse perpetration is most likely quite high. Dutton and Hart (1992) investigated risk markers for family violence among federally incarcerated offenders. Three groups of offenders were categorized in order to compare them on a variety of variables. In this case, family violence included physical assault, sexual assault, or threats against a first-degree relative, spouse, common-law spouse or live-in girlfriend, child or stepchild. The three groups included: Non-Violent offenders (NV) whose files contained no reports of violence, Stranger Violence offenders (SV) whose files contained reports of extrafamilial violence only, and Family Violence offenders (FV) whose files reflected involvement in violence against family members (either alone or in combination with violence against strangers). It is worthwhile to note that 79% of the offenders who had a record of perpetration of family violence also had a record of committing violence against strangers, and therefore, according to Saunders' (1992) findings are most likely to commit severe assaults.

A series of analyses were performed in order to differentiate the three groups. In regards to abuse in the family of origin, the Family Violence group was more likely to report being abused in their family of origin than the other two groups (Dutton & Hart, 1992). Similarly, Robinson and Taylor (1995) found that childhood victimization by family members was significantly correlated with later perpetration of violence against spouses in their sample of federally incarcerated offenders.

Comparisons between Dutton and Hart's (1992) three groups on the prevalence of personality disorders found that the highest rate of personality disorders occurred in the Family Violence group. Specifically, 21.5% were found to have Antisocial personality disorder, while 22.0% were found to have other personality disorders especially borderline, narcissistic and mixed personality disorders.

Similarly, Robinson and Taylor (1995) found that a significant relationship between the diagnosis of a personality disorder and the perpetration of spousal assault existed.

To summarize, according to Dutton and Hart (1992), risk markers for family violence in the federal population include "abuse in the family of origin, personality disorders, and prior record of violence" (Dutton & Hart, 1992, pp. 109).

Two other studies examined correlates to spousal assault among offenders. Hart and his colleagues (1994) found that in most respects offenders who had a conviction for spouse abuse or had mention of spouse abuse in their file were very similar to other offenders whose files did not mention spouse abuse. However, the two groups differed in age, relationship status, and ethnicity (Hart et al., 1994). The wife assaulter group was older by about five years, was more likely to report being currently in a relationship, and there were ethnic differences in the composition of groups (Hart et al., 1994). It is important to note that the offenders in this sample were provincial offenders residing in the community.

Robinson and Taylor (1995) also looked for variables that correlated with spousal assault. They found that several variables correlated significantly with spouse abuse perpetration among federally sentenced offenders. Demographically, age, education level, and number of marriages had significant correlations such that wife assaulters tended to be over 30 years of age, have less than a high school diploma, and have three or more marriages. In terms of mental health issues, perpetrators of spousal assault had a greater tendency to have alcohol abuse problems, were unlikely to have drug abuse problems, had a mental illness diagnosis, had a mood-anxiety disorder, and had a personality disorder (Robinson & Taylor, 1995). Interestingly, there was a significant correlation between the presence of spouse abuse and the number of

convictions such that spouse abusers were likely to have 15 or more convictions (Robinson & Taylor, 1995).

Therefore, within the already at-risk population for spouse abuse, the correlates for spouse abuse include demographic, historical, psychological, and criminal history variables. Particularly pervasive is the finding that childhood victimization, personality disorders, and older age are correlated with the likelihood of an offender engaging in spousal assault.

Hart and his colleagues (1994) estimated that 22% of offenders released into the community were perpetrators of spousal violence. Another estimate of serious spouse abuse incidents among federally sentenced offenders living in the community can be calculated using community incident reports routinely collected by CSC. An examination of these incidents for one year revealed that approximately 22% of all major violent incidents of murders, attempted murders, major assaults, and sex offences were perpetrated on spouses, female partners, or girlfriends.

A more detailed breakdown indicated that none of the murders or attempted murders were perpetrated on spouses, while 44% of major assaults and 16% of sex offences had a spouse, female partner or girlfriend as the victim. It is important to note, however, that the reporting of incidents as sensational incidents by Case Management Officers is quite subjective.

EXAMPLES OF CSC INVOLVEMENT IN SPOUSE ABUSE PREVENTION AND TREATMENT

Identification of Risk and Need regarding Spouse Abuse

The importance of identifying offenders' risk and need levels regarding spouse abuse during incarceration has several important functions including treatment need identification, and monitoring needs for private family visits, temporary absences and conditional releases. Several tools available in OMS serve this function including Intake Assessment, identification of alerts, flags and immediate needs, and Community Risk/Needs Management Scale.

The Intake Assessment process is completed upon the offender's arrival at the institution. The offender is interviewed and from this interview the need levels of offenders are identified. The need areas include employment, marital/ family, associates/ social interaction, substance abuse, community functioning, personal emotional orientation, and attitude. Within the marital/ family component, the offender's family experience during childhood, current relationships with family members, and current and previous marital and family experiences are assessed. It is within this section that spouse abuse perpetration may be revealed.

Similarly, in the Community Risk/ Needs Management Scale, several need areas are assessed including academic/ vocational skills, employment pattern, financial management, marital/ family relationships, companions/ significant others, accommodation, behavioural/ emotional stability, alcohol usage, drug usage, mental ability, health, and attitude. Assessment takes place upon the offender's release into the community and every six months thereafter. Similar to the intake

assessment, the marital/ family relationships need area can be influenced by spouse abuse.

A recent addition to the identification of risk and needs aimed specifically at family violence is the Family Violence Risk Assessment. The Family Violence Risk Assessment (FVRA) was piloted in Edmonton Institution from November 1995 to April 1996, approved for regional implementation in the Prairie region's RMC in April 1996, and approved for national use in March 1997. The Family Violence Risk Assessment is administered during Intake Assessment and is comprised of two steps. First, the offenders are screened using a set of four screening criteria (Family Violence Risk Indicators: Federal Offenders) to determine if the offender is at risk to commit family violence. The screening criteria for all regions except the Pacific region includes meeting any or all of the following risk indicators: past assaults of family members; prior record of violence; victim and/ or witness to family violence as a child or adolescent; personality disorder with anger, impulsivity or behavioural instability. If the criteria are met in whole or in part, the Case Management Officer completes the Spousal Assault Risk Assessment (SARA) (Kropp et al., 1995) to determine if the offender's level of risk is low, moderate or high. A copy of the SARA is provided in Appendix A.

In a recent study conducted for CSC, it was determined that the SARA was being administered to approximately 40% to 50% of federally sentenced males within the Pacific region. Based on their review of the distribution of risk levels on the SARA, the authors suggested that this rate should be about 30%. Therefore, the original screening criteria which selected 40% to 50% of the offenders was revised for the Pacific region upon the advice of the creators of the SARA. The screening criteria used by the Pacific region were revised to (a) the offender is a documented or self-reported spousal assault perpetrator, (b) the

offender is a documented or self-reported victim of spousal assault (may indicate avoidance of responsibility of own perpetration, or may actually be a victim making the offender more at risk for retaliatory violence), (c) the offender is a suspected spousal assault perpetrator (based on reasonable grounds)

These revised screening criteria may fail to identify some abusers because of the low rate of reporting and high amount of denial of domestic violence by victims and perpetrators. In addition, the earlier version of the screening criteria was based upon empirical research (Dutton & Hart, 1992) while the revised screening criteria were based upon the recommendations of the authors without the benefit of additional analyses. A subsequent research study compared the rates of identification of spousal assault using the original and revised criteria (Kropp & Hart, 1998). This research found that in fact, the revised screening criteria were more accurate in identifying spousal abusers than the original screening criteria (Kropp & Hart, 1998). However, the methodology used to assess successful identification may have biased the results. In the study, spousal abusers were identified through the existence of spousal assault histories, which is also the main screening criterion for the SARA. The original screening criteria relied on additional items which were not directly related to spouse abuse, but have been shown to be associated with spouse abuse perpetration or the potential for spouse abuse perpetration.

The SARA is useful in assisting Case Management Officers in making recommendations regarding Family Violence programming, Private Family Visits and for release considerations (Gitzel, 1997). General guidelines as to programming and decision-making regarding Private Family Visits have been outlined based upon risk level identified by the SARA (Gitzel, 1997). According to these suggestions, offenders classified as low risk on the SARA should be referred to a Family Violence Awareness Program, while offenders assessed as

moderate or high risk should be referred to Family Violence Treatment Programs. Similarly, low risk offenders would likely have Private Family Visits recommended, moderate risk offenders may be recommended to receive Private Family Visits but the visits should be monitored closely, while high risk offenders should not be recommended to receive Private Family Visits until they have completed a Family Violence Program and have been judged to have reduced risk.

Preliminary analyses were performed on the data collected at Edmonton Institution's Intake Assessment Unit on the number of offenders and the risk rating of offenders administered the SARA in a six month period (January 1997 to June 1997) (Gitzel, 1997). Overall, within this time period 417 offenders completed the Intake Assessment and of these 244 met the screening criteria and therefore had a SARA completed. Therefore, during this period, 58.5% of all offenders who went through the Intake Assessment process were identified as being at risk for family violence using the original screening criteria detailed earlier. Of those identified as being at risk using the criteria, 42% were classified as low risk, 30% as moderate risk, and 28% as high risk. Of all offenders who went through the Intake Assessment process at Edmonton Institution, 41% were found to not be at risk for family violence while 25% were found to be low risk, 17% were classified as moderate risk, and 17% were assessed as high risk. Therefore, 34% of this sample required comprehensive Family Violence Treatment plans.

Treatment Programs

Since the inception of the Family Violence Initiative in 1991, efforts have been made by CSC to address the issue of family violence in the federal population. The mandate under the Family Violence Initiative was to reduce the incidence of family violence in the offender population by educating, treating, and preventing family violence (Vanderburg & Knoll, 1996). The "Living Without Violence" and "Parenting" programs were aimed at challenging the offenders' attitudes and beliefs about various issues related to family violence while providing offenders the necessary skills to have non-abusive relationships (Vanderburg & Knoll, 1996). Three levels family violence programming are available: low, moderate and high intensity. While low intensity programs contain only the educational component of treatment, the moderate and high intensity programs contain education, skill development and relapse prevention components. High intensity programming is distinguished from moderate intensity programming in the duration and the degree of pre and post treatment monitoring.

Treatment programs within the community were also initiated across the country and several treatment demonstration projects were launched throughout several cities. Due to the special needs of offenders, CSC often contracted the services of professionals in the community in order to develop offender-specific treatment (Vanderburg & Knoll, 1996). The demonstration projects were based upon a combination of pro-feminist (power based) and social learning theories. Most used a psychoeducational approach that aimed at changing the underlying attitudes and beliefs that often lead to spouse abuse by providing information and by teaching new skills to offenders (Vanderburg & Knoll, 1996). In order to address the safety needs of partners, support groups were provided for the partners of the abusive men (Vanderburg & Knoll, 1996). Due to the prevalence

of family violence issues among federally incarcerated and supervised offenders, such efforts at prevention, education, and treatment are important.

Detention

Detaining offenders who have been shown to exhibit signs of potential danger to spouses is a possible course of action, particularly for offenders perceived to be extremely dangerous to their partners. Offenders who are likely to commit assaults upon their release and have committed a scheduled offence in their current sentence, can be referred for detention (CCRA, 1992). Of those offenders deemed likely to re-offend with a serious offence before the expiration of their sentence, the offenders must either have committed a serious violent offence or new information must be available which the decision-makers judge to increase the offender's likelihood of committing a new serious offence. This second group of offenders is referred for detention by the Commissioner.

Using the detention legislation to prevent serious harm to spouses of offenders likely to perpetrate serious spousal assaults is an option for CSC. Based on information concerning the rationale behind Commissioner's referrals for the year 1996 and the first half of 1997, thirty offenders were referred due to issues related to domestic violence. For 1996, 24% of Commissioners referrals had a domestic violence component and for 1997, 17% had this component. These referrals with a domestic violence component tended to include cases where there was concrete evidence of previous spousal assaults, and where the offenders made specific threats of death or serious harm towards current or previous spouses/ partners and therefore these cases probably only represent the most severe ones. Often, previous spousal assaults are undocumented and therefore would be unknown to decision-makers. In addition, the probability that

CSC would become aware of explicit threats are likely quite low since spouses may not report threats due to fear, minimization, or denial.

Although detaining offenders who are likely to commit serious violence against their spouses to the end of their sentence is one way for the Service to prevent domestic violence, it is only a temporary solution. Once the offender is released after the completion of his sentence the offender is not supervised in any capacity. A better approach may be to slowly reintegrate the offender into the community while maintaining intense supervision.

Offender Monitoring while Released

Although the level of offender monitoring during release appears to be an important issue for federally sentenced offenders who have a high risk to commit spousal assault, guidelines and research into this area appears to be limited. One tool available is the Community Risk/ Needs Management Scale (CRNMS) which is administered to offenders in the community within 30 days following their release and every six months thereafter. Readministration of the CRNMS can detect changes in risk and need level over time. General guidelines are available to case management officers on the frequency of offender contacts that are based on the level of risk and need (Case Management Manual, 1997). For example, offenders who are classified as high risk/ high need should have a minimum frequency of contact with supervisors of four times per month whereas offenders classified as low risk/ low need should have contact at least once per month (Case Management Manual, 1997). The offender's risk and need level can be influenced by the marital/ family relationships component of the Community Risk/ Needs Management Scale and thereby the possible risk of spousal assault will play a role in determining monitoring frequency.

Due to the potential for harm to spouses, and indirectly to other family members, offenders who are at high risk to perpetrate spouse abuse should be monitored closely. Several researchers have presented some suggestions for improving the response to potential spouse abusers residing in the community (Campbell, 1995; Hofford, 1991; Myers, 1996). Hofford (1991) presents a model of supervision conditions for spouse abusers, including financial, protective, treatment, and punitive elements. This model has the capacity to assist decision-makers in determining the necessary conditions to be imposed on offenders released into the community (Hofford, 1991). Hofford (1991) suggests that cases where domestic violence has occurred require that supervisors

maintain periodic private contact with the victim of the violence. In addition, due to the likelihood that victims will feel threatened and afraid to volunteer information, unannounced home visits should occur periodically (Hofford, 1991). The purpose of speaking with the spouse is to ensure her safety rather than having the spouse monitor and report behaviour (Hofford, 1991). Consistent with this suggestion, the Service has recommended that the supervisor should communicate with collateral contacts such as family members in an effort to help the offender in the process of achieving goals such as remaining offence free and abiding by the conditions of the conditional release (Case Management Manual, 1997). Additionally, partners of offenders who participate in community family violence programs are often contacted by the community programs or by associated organizations for support and safety planning services.

As mentioned earlier, Campbell's (1995) Danger Assessment instrument assesses the risk of spouse abuse perpetrators committing homicide. Campbell (1995) suggests that this instrument would be useful in "informal prediction discussions with probation officers or other officers of the court responsible for decisions about continuing probation by those treating abusing men" (pp. 104). It may be useful for parole supervisors to administer instruments like the Danger Assessment and other dynamic risk assessment tools to offenders in the community upon their release into the community and periodically thereafter to monitor changes in risk levels.

Myers' (1996) overview of the projects initiated by Corrections Research and Development Branch of the Correctional Service of Canada examines the preparation of a probation officer training manual specifically directed at monitoring spouse abuse. This training manual is being designed "to provide probation officers with skills to run male batterer educational programs and to

develop a partner outreach model that is accountable for women's safety" (Myers, 1996, pp. 32). This project was initiated in order to provide treatment to offenders under supervision that was not previously available, especially in isolated and rural areas (Myers, 1996). The training manual addresses the gap between offenders' needs for treatment while in the community and the availability of the treatment by training probation officers to provide education programs as part of their regular supervision (Myers, 1996).

SUMMARY AND DISCUSSION

According to a national Canadian survey, 48% of women with a previous marital partner reported violence by a previous spouse while 15% of women currently with male partners reported violence by their current spouse (Canadian Centre for Justice Statistics, 1994). Overall, in the entire sample of women surveyed, 15% had suffered serious abuse in any relationship: 5% had experienced serious abuse in the current relationship while 31% had experienced severe abuse in previous relationships (Canadian Centre for Justice Statistics, 1994).

The killing of women by marital partners (uxoricide) has been reported to be 13 per million couples in the Canadian population (Wilson & Daly, 1994) while 0.1 per 1 000 000 women aged 15 and older were killed by intimate partners annually in Ontario (Crawford & Gartner, 1992). In contrast, 4 husbands per million couples were killed by their spouses (Wilson & Daly, 1994). Using police reports in Canada, Wilson and Daly (1994) found that between 1974 and 1992, women killed by their husbands constituted 38% of all adult female homicide victims while only 6% of adult male homicide victims were killed by their wives (Wilson & Daly, 1994). Similarly, Crawford and Gartner (1992) reported that in Ontario, intimate femicides accounted for 61% of all solved cases of murder of women, and therefore women were more likely to be killed by an intimate partner than anyone else.

The rate of spouse abuse in the offender population has also been examined. Robinson and Taylor (1995) reviewed the institutional files of a regionally stratified random sample of 935 federal offenders in Canada and found that 22% of offenders' files indicated physical abuse against spouses. This estimate of physical abuse against female partners rose to 27% when only the files of offenders who were involved in a marital relationship at least once in their lives

were included. Similarly Hart and his colleagues (1994) found that, in a sample of 256 male adult offenders on bail, probation, or provincial parole in one region in Canada, 22% had current or past charges or convictions for wife assault or had a history of wife assault documented that did not result in charges. This study was the only one available which identified the rate of spouse abuse among offenders in the community, although these offenders were provincial not federal offenders.

Demographically, most research has found that abusers tend to be unemployed, under-educated, males with low occupational status who are in their early thirties or younger, although these findings are not consistent. Psychologically, spousal assault offenders have been found to have low self-esteem and experience depression, have a personality disorder, especially anti-social or borderline, have a high need for control and dominance, and are impulsive. Perpetrators of spousal assault have been found to become angrier in conflict situations than non-violent men and to have poor verbal skills in asserting wants and needs in close relationships.

In terms of attitudinal variables, perpetrators of spouse abuse tend to externalize blame, engage in denial and minimization regarding the frequency and severity of assaults and have attitudes in favour of spouse specific violence. One consistently found risk marker for spousal violence is witnessing or being a victim of physical abuse as a child. Empirical research has found a correlation between overall drinking behaviour or alcoholism and risk of spouse abuse offending although taking intoxicants prior to an abusive episode has not shown as clear a relationship.

Men who are more violent outside of the family tend to inflict more severe assaults on spouses. Often men who commit severe assaults on their spouses are also abusive psychologically and sexually towards them. Particularly relevant is the finding that severe abusers tend to be involved in a criminal lifestyle and often have their attitudes towards spouse abuse reinforced by friends.

Spouse abusers and especially severe spouse abusers appear to have many characteristics in common with federally supervised offenders. In addition, Crawford and Gartner (1992) found that 30% of offenders who had murdered their spouses had an arrest record for violent crime and 29% had an arrest record for non-violent crime.

Triggers or situational factors that appear to increase the likelihood of spouse abuse at a particular time include stress, emotional arousal, and specific incidents such as separation. These factors are likely to occur when offenders are released into the community since reintegration into the community is particularly stressful.

According to this information, the risk to spouses of federally supervised offenders of becoming perpetrators of spouse abuse appears to be quite high. The best current estimate of spouse abuse perpetration among federally incarcerated offenders is 27% although this is likely an underestimate. Due to this high level of risk of harm to spouses, the Service has responded with several practices aimed at detecting and reducing the prevalence of spouse abuse perpetration among federal offenders. Currently, staff use the Family Violence Risk Assessment process as part of the Intake Assessment to assess level of risk for perpetration of family violence. In addition, the Community Risk/Needs Management Scale, which assesses the level of supervision necessary for offenders released into the community, is affected by family violence

perpetration. These methods provide Case Management Officers with the ability detect changes in risk and needs, arrange the necessary programming, and provide the appropriate the level of supervision to offenders released into the community.

FUTURE DIRECTIONS

The current research has focused on risk markers associated with spousal violence. For federally incarcerated offenders in Canada, several studies have primarily utilized file reviews as the methodology assessing the degree to which spousal violence has historically been perpetrated by offenders. The obvious limitation of this method is the rates of unreported and/ or undocumented spousal assaults among offenders. Therefore, in order to provide a more complete picture of the percentage of offenders who have engaged in, or will potentially engage in domestic violence, several sources of data must be used including reports of offenders, spouses (girlfriends, partners), witnesses to violence (probation/ parole officers, friends, family members), and official documents (complaints, arrests, convictions). According to file reviews, the rate of spousal violence among federally incarcerated male offenders is approximately 27%. With improvements in data collection methodology, rates of reported domestic violence might rise among the very select group of federally incarcerated offenders.

Similarly, very little research has assessed the rates of spousal violence perpetrated by convicted offenders on release. Although a study by Hart and his colleagues (1994) did assess the percentage of offenders with spouse abuse in their file, this study used male offenders on bail, probation, and provincial parole in the Fraser Region of the B.C. Corrections Branch as the sample and therefore is likely not generalizable to the male federally sentenced offender population. Future research should use offenders released from federal institutions as the sample from which measures of domestic violence history should be obtained.

An accurate estimate of the rate of spouse abuse perpetration among federal offenders released into the community is necessary. Currently the only available

estimate is based upon community incident statistics, which are incidents judged as serious that occur when the offenders are in the community. Because reporting incidents as sensational incidents is subjective, accurate and objective measures of spousal assaults, especially serious spousal assaults or murder, must be researched.

Risk assessment tools that determine the level of risk for spouse abuse are a potential area for research. Presently, the SARA is being administered to federally incarcerated male offenders in all regions of Canada. The administration of the SARA when first incarcerated and then reviewed upon release can accomplish several goals. First, the recognition of the risk of spousal assault can help Case Management Officers direct offenders to the relevant treatment programs to decrease the risk of future domestic violence. Second, it can heighten parole officers' awareness of signs of perpetration of domestic violence and help establish supervision practices for these offenders once they are released into the community.

Currently, the SARA is being administered to offenders who can be identified as being at risk for spouse abuse by the use of one of two sets of criteria. Therefore, if offenders are not found to be at risk according to the criteria, then the SARA is not administered. However, there may be some value in both practical and research terms, for all federally sentenced offenders to be administered the SARA at admission. For researchers, a more accurate rate of domestic violence could be ascertained. In practical terms, more offenders who are or have been perpetrators of spousal assaults could be identified and targeted for appropriate treatment. This would potentially decrease the amount of harm experienced by spouses and third parties (children, other family member, etc.) and decrease the cost of medical or psychiatric treatment of victims. A limitation to this recommendation is the time and financial cost

involved in administering the SARA to all offenders. In addition, the SARA requires further research regarding its reliability and validity.

Another option for an instrument assessing spouse abuse is the Propensity for Abusiveness scale (PAS) (Dutton, 1995b). The PAS could provide an accurate reflection of spouse abuse since it contains no overt reference to abuse which thereby decreases problems associated with denial and minimization by the perpetrator (Myers, 1996). The PAS also correlates well with wife's reports of male abusiveness (Myers, 1996).

Future research should also examine how reporting frequency, special conditions, and surprise visits effect the likelihood of spousal assault perpetration among federal offenders released into the community. This research would provide the necessary information to all parole officers to achieve the optimal supervision routine to ensure the prevention of spouse abuse.

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APPENDIX A

Correctional Service Canada

Service correctionnel Canada

SPOUSAL ASSAULT RISK ASSESSMENT

Developed by/Développée par

BC Institute on Family Violence

ASSESSMENT INFORMATION

Name of Offender: _____ FPS #: _____

Name of Assessor: _____ Title: _____

Signature: _____ Date: _____

RATING PROCEDURE

The SARA is a checklist to assist Case Management in determining risk for violence that might occur in the context of spousal assault. It is important that assessors **do not add the individual ratings** to determine the level of risk. That is, an offender may have only a few items rated "2" and still be at high risk for violence. General coding instructions are presented below; see the SARA manual for specific instructions about the coding of individual items.

"0" — absent **"1"** — partially or possibly present **"2"** — definitely present

CRIMINAL HISTORY	Rating (0-1-2)	Critical Item (Check box)
1. Past assault of family members *Does not include past or present intimate partners*	❑	❑
2. Past assault of strangers or acquaintances	❑	❑
3. Past violation of conditional release or community supervision	❑	❑
PSYCHOSOCIAL ADJUSTMENT		
4. Recent relationship problems *Last year in the community or during incarceration*	❑	❑
5. Recent employment problems *Last year in the community or during incarceration*	❑	❑
6. Victim of and/or witness to family violence as a child or adolescent	❑	❑
7. Recent substance abuse/dependence *Last year in the community or during incarceration*	❑	❑
8. Recent suicidal or homicidal ideation/intent *Last year in the community or during incarceration*	❑	❑
9. Recent psychotic and/or manic symptoms ❑ ***Suspected*** *- mental health report needed* ❑ ***Confirmed*** *- coded from existing mental health report*	❑	❑
10. Personality disorder with anger, impulsivity, or behavioral instability ❑ ***Suspected*** *- mental health report needed* ❑ ***Confirmed*** *- coded from existing mental health report*	❑	❑

SPOUSAL ASSAULT HISTORY	Rating (0-1-2)	Critical Item (Check box)
11. Past physical assault	❑	❑
12. Past sexual assault/sexual jealousy	❑	❑
13. Past use of weapons and/or credible threats of death	❑	❑
14. Recent escalation in frequency or severity of assault *Last year in the community or during incarceration*	❑	❑
15. Past violation of "no contact" orders	❑	❑
16. Extreme minimization or denial of spousal assault history	❑	❑
17. Attitudes that support or condone spousal assault	❑	❑
CURRENT/MOST RECENT OFFENCE ***Complete this section if any current offences involve spousal assault or if the offender committed a spousal assault in his last year in the community***		
18. Severe and/or sexual assault	❑	❑
19. Use of weapons and/or credible threats of death	❑	❑
20. Violation of "no contact" order	❑	❑
OTHER CONSIDERATIONS ***Specify any risk factors not rated elsewhere***		
• _____	❑	❑
• _____	❑	❑
• _____	❑	❑

RISK FOR SPOUSAL ASSAULT			
	Low	Moderate	High
• Risk of violence toward partner or ex-partner	❑	❑	❑
• Risk of violence toward others *Includes violence against targets other than a partner or ex-partner (e.g., child, new spouse of ex-partner, parents-in-law) that might occur in the context of spousal assault* Specify possible target(s):_____	❑	❑	❑